

7160 3901 9842 6648 8325

**Certified
Mail
Receipt**Domestic Mail Only
No Insurance
Coverage Provided

Postage	
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 5.11

Postmark
Here

Sent To:
MARILYN BROOKS, WARDEN
PO BOX
1-745 ROUTE 19
ALBION, PA. 16475-0001

06/30/05 SERVICE FOR MARILYN
BROOKS RETURNED UNEXECUTED. AS
OF THIS DATE NEITHER THE GREEN
CERTIFIED CARD OR PACKAGE HAVE
BEEN RETURNED BY THE POSTAL
SERVICE.

5-11E, O/P, 3/15/05, SRB

PS Form 3800, January 2003

US Postal Service

Certified Mail Receipt

CA 05-11E

2. Article Number



7160 3901 9842 6648 8332

3. Service Type CERTIFIED MAIL

4. Restricted Delivery? (Extra Fee) ☐ Yes

1. Article Addressed to:

ATTORNEY GENERAL COMMONWEALTH OF PA
564 FORBES AVENUE
6TH FLOOR MANOR BLDG
PITTSBURGH, PA. 15219

5-11E, O/P, 3/15/05, SRB

PS Form 3811, January 2003

Domestic Return Receipt

2. Article Number



7160 3901 9842 6648 8349

3. Service Type CERTIFIED MAIL

4. Restricted Delivery? (Extra Fee) ☐ Yes

1. Article Addressed to:

LEHIGH COUNTY DISTRICT ATTORNEY
LEHIGH CO. COURTHOUSE
P.O. BOX 1548
ALLENTOWN, PA. 18105

5-11E, O/P, 3/15/05, SRB

PS Form 3811, January 2003

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Received by (Please Print Clearly)

B. Date of Delivery

C. Signature

X

☐ Agent
☐ Addressee

D. Is delivery address different from item 1?
If YES, enter delivery address below:

☐ Yes
☐ No

COMPLETE THIS SECTION ON DELIVERY

A. Received by (Please Print Clearly)

B. Date of Delivery

C. Signature

X

☐ Agent
☐ Addressee

D. Is delivery address different from item 1?
If YES, enter delivery address below:

☐ Yes
☐ No